

UNITED STATES DISTRICT COURT
EASTERN DISTRICT OF LOUISIANA

UNITED STATES OF AMERICA	*	CRIMINAL NO. 09-400
VERSUS	*	SECTION: "F"
TAURUS ROBINSON		*
	*	* *

FACTUAL BASIS

If this matter were to proceed to trial, the government would prove the following facts through competent evidence:

Joe Kopsa would testify and provide evidence showing that Medicaid is a public insurance (assistance) program that provides primary and preventative health care coverage to low-income families and persons with medical disabilities. UNISYS Corporation is a fiscal intermediary that processes Medicaid claims and makes reimbursement to providers for rendering services to qualified Medicaid recipients. Each claim submitted by a provider discloses the recipient's identification number and the name of the recipient receiving the service, a description of the procedure using a billing code that accurately describes the service rendered, the date of service, the amount billed and the provider's unique Medicaid number.

Records from Medicaid and documents recovered in a search of A New Beginning of New Orleans, Inc. (ANBNO) in May 2005 would prove that ANBNO was an agency located at 3714 Westbank Expressway, Suite 7, Harvey, Louisiana, that was certified by Medicaid to provide services to eligible Medicaid recipients. On April 28, 2001, ANBNO applied for a Medicaid Provider Number (PN) to become a Personal Care Attendant Provider. The application disclosed that Michael Davis and Akasia Lee were the owners of ANBNO. ANBNO was issued Medicaid PN 0018874; Medicaid changed the PN for ANBNO to 17081 in September 2003.

Joe Kopsa would testify that ANBNO transmitted its claims to UNISYS electronically. Each electronic billing included a professional services certification, signed by the provider, which stated in part: “the services rendered were necessary, medically indicated and were rendered by me or under my personal supervision. I have reviewed the claim information submitted and certify that it is true, accurate and complete . . . I understand that payment and satisfaction of these claims will be from federal and state funds, and that any false claims, statements, or documents, or concealment of material fact, may be prosecuted under applicable federal and state laws.”

Linda Wascom, a Program Director for Louisiana Medicaid would testify about Medicaid’s Early and Periodic Screening, Diagnosis and Treatment (EPSDT) Program which covers personal care services (PCS) available to eligible recipients meeting the medical necessity

criteria for the services. PCS are prescribed by physicians who also approve a plan of care (POC) which specifies the type of PCS to be provided, that is, the activities of daily living for which assistance is needed, and the minimum and maximum frequency and duration of these services.

PCS must be provided through a licensed Personal Care Attendant Medicaid provider in a recipient's home unless it is medically necessary to do so elsewhere. The recipient's immediate family was not allowed to provide PCS. Immediate family was defined as father, mother, sister, brother, spouse, child, grandparent, in-law, or any individual acting as parent or guardian of the recipient.

The purpose of ordering PCS was to prevent institutionalization of the recipient, and to enable the recipient to be treated on an outpatient basis rather than an inpatient basis. EPSDT PCS included:

1. Basic personal care, toileting and grooming activities, including bathing, hair care and assistance with dressing;
2. Assistance with bladder and/or bowel requirements, including helping the client to and from the bathroom or assisting with bedpan routines;
3. Assisting with eating and food, nutrition and diet activities, including preparing meals for the recipient only;
4. Performing incidental household services only for the recipient that are essential to the recipient's health and comfort in the home, such as changing and washing the recipient's bed linens or cleaning up, or of meal preparation for the recipient only.
5. Accompanying, but not transporting, the recipient to and from the doctor;

Ms. Wascom would testify that, to properly document EPSDT PCS, providers must include dates of service, services provided, total number of hours worked, time period worked, condition of recipient and service provision difficulties.

The investigation of the billings submitted by ANBNO to the Louisiana Medicaid Program conducted by the Federal Bureau of Investigation, the Office of Inspector General for the U.S. Department of Health and Human Services and the Louisiana Department of Justice's Medicaid Fraud Control Unit indicated that virtually every claim submitted for reimbursement was false and fraudulent.

Crystal Black, a former employee of ANBNO, would testify that Taurus Robinson was an employee of ANBNO. As one in charge of training at ANBNO, Black would testify that Robinson routinely attended training. Sign-in sheets bearing Robinson's signature would be introduced into evidence.

The government would introduce into evidence the patients file of LoMo (as described by the recipient's initials) that were seized from the ANBNO office when it was searched by federal law enforcement authorities. Those patient file includes time sheets and PCS daily schedules indicating that Robinson personally provided PCS to LoMo, a Medicaid recipient. The medical records contain fraudulent time sheets and PCS daily activity schedules and indicate that Taurus Robinson provided PCS to the LoMo.

Crystal Black would testify these time sheets were used by Akasia Lee as the basis for billing the Medicaid program for PCS for this patient and other recipients that Robinson claims to have provided services and which services were not provided.

LoMo, a minor child, would testify that he does not know Taurus Robinson, has never met Taurus Robinson and has never received any type of PCS from Taurus Robinson. The parents and guardians of LoMo would also testify that they do not know Robinson and that he has never provided by services for LoMo

The government would introduce into evidence financial and billing information provided by Medicaid establishing that ANBNO received approximately \$32,135 for PCS based upon false ANBNO time sheets indicating that Taurus Robinson was the provider of PCS that were never rendered.

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